PTO/SB/01 (3-97)
Approved for use through 6/30/98. OMB 0651-0032
Patent and Trademark Office; US DEPARTMENT OF COMMERCE

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Under the Paperwork Reduction Act of	1995, no persons are requir	ed to respond to a collection	on of informa	ation unless	it displays a valid OMB control number.				
DECLARATIO	)N FOR	Attorney Dock	et No.						
UTILITY OR I	DESIGN	First Named In	iventor	Jar	nes A. Ruse				
PATENT APPL	<b>ICATION</b>		COMPLETE IF KNOWN						
		Application No.							
□ Declaration	Declaration	Filing Date							
submitted with or	submitted after	Group Art Unit							
initial filing	initial filing	Examiner Name	è						
As a below named inventor,	I hereby declare that	<u> </u>							
My residence, post office ad-	dress, and citizenship	p are as stated belov	w next to	my nam	e.				
I believe I am the original, fi	rst and sole inventor	(only if one name	is listed b	pelow) or	an original, first and joint				
inventor (if plural names are									
on the invention entitled:		•							
MIRROR WITH BA	SE BRACKET HAVIN	G INTEGRALLY-MO	OLDED RE	INFORCE	EMENT				
	(Ti	itle of the Invention	)						
the specification of which									
is attached hereto									
or	TT 1: 10			nom r					
					ternational Application				
Number:	and was amend	ded on	(11	f applica	ble).				
I hereby state that I have rev	iewed and understan	d the contents of th	e ahove i	dentified	specification including the				
claims, as amended by any a				deminied	specification, including the				
ciamis, as amended by any a	mendment specifical	ily leterica to above	٥.						
I acknowledge the duty to dis	sclose information w	hich is material to	natentabi!	lity as de	efined in Title 37. Code of				
Federal Regulations § 1.56.			paromaon	my as a	77, Code 01				
I hereby claim foreign priorit	y benefits under Tit	le 35, United States	Code §1	19 (a)-(c	) of any foreign				
application(s) for patent or in									
designated at least one count									
below, by checking the box,	-		•						
international application hav	ing a filing date befo		cation on	which p	riority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date		ority	Certified Copy Attached				
		(MM/DD/YY)	Noic	Claimed	YES NO				
			+						
					님 님				
Additional foreign application number		<del>`</del>							
I hereby claim the benefit under Title 35	, United States Code §119(	e) of any United States pro	visional appl	lication(s) li	sted below.				
Application Number (s)	Filing Date (	MM/DD/YY)			al provisional application				
			Г	numbers	are listed on a supplemental				
60/481,237	08	3/15/03	Ţ	priority data sheet PTO/SB/02B					
			í	attached	hereto.				
				<del></del>					

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Under the Paperwork Redu									splays a valid Of	MB con	trol number.	
		ECLARAT										
I hereby claim the benefit unde America, listed below and, inso matter provided by the first par Code of Federal Regulations §	ofar as the subjeragraph of Title	ect matter of each of 35, United States	of the claims of t Code §112, I ack	this ap; knowle	plication edge the o	is not disclosed in duty to disclose in	n the prior Unite Iformation which	ed States on the contract of t	or PCT International	al applica as define	ation in the ed in Title 37,	
U.S Parent Appli	l .	Parent			rent Filing	·	P	arent Paten				
Number	mber		<u>(N</u>	MM/DD/YY	/YY)		(if applic	:able)	1			
	!											
Additional U.S. or Po	CT internatio	nal application n	umbers are list	ted on	ı a suppl	emental priority	data sheet P	ro/sb/c	)2B attached here	to.		
As a named inventor, I here Trademark Office connecte	eby appoint th	he following regis  Customer N Or	stered practition Number 20915	oner(s	s) to pros		cation and to t			ne Paten	it and	
			practical,	) =	M	ation ne	xca 2372		Label Her			
Name		Regist	ration No.	Т		Name		T	Registrat	ion N	0.	
John E. McGarry		22	2,360	G.	. Thom:	as Williams	,		42,2			
Joel E. Bair			3,356	M	ichael J	F. Kelly			50,8	59		
Mark A. Davis		37	7,118									
Additional registered p			-	ered I	Practitio	ner Information	sheet PTO/S	B/02C a	ttached hereto.			
Direct all corresponde	ence to 🛚					20915	or C	orresp	ondence Addr	ress be	elow	
**	C Thom	or Bar Code	<del></del>		<u></u>		<u> </u>					
Name	1	as Williams, I y Bair PC	Reg. No. 42	.,220	;							
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City, State, Zip	Grand R	apids, Michi	igan 4950?	3								
Country	US	T	elephone	$\Box$	616-7	742-3500	Fax		616-742-10	)10		
I hereby declare that all statements were made with the United States Code and that sur	knowledge that	ıt willful false stater	ments and the lik	ke so n	made are p	punishable by fine	e or imprisonme	ent, or bot				
Name of Sole or I	First Inv	entor	ПАр	etiti	ion ha	as been file	ed for this	s unsi	igned invent	tor.		
Given Name	(first and	d middle [if	fany])			F	amily Na	ıme o	or Surname			
James A.				لہ	Ruse							
Inventor's Signature		James	$\overline{O}$ .	Ku		-		Dated 8-5-04				
Residence: City	Alle	_	State	MI		Country	US	Citizenship US				
Post Office Address	2584	36 <sup>th</sup> Street										
City	Alleg	-	State	M		Zip	US		Country	US		
Additional inventors	are being r	named on the 1	supplementa	al add	litional	inventor(s) sh	neet(s) PTO/	SB/02/	A attached here	to.		

Please	type	a	plus	sign	in	this	box:

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Name of Inventor			A petit	ion has	been	filed fo	r this unsig	ned in	nventor		·	
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Keith D.		Foote										
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Name of Inventor			A petit	ion has	been	filed fo	r this unsig	ned in	nventor			
	rst and middle [if ar								r Surname			
Kenneth C.				Peter	rson							
Inventor's Signature	Beam he	7 64	tuo	·				Date	sted 8/5/04/			
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Name of Inventor			A petiti	on has	been	filed for	r this unsig	ned ir	nventor			
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Given Name (fir  Inventor's Signature  Residence: City	rst and middle [if ar			ion has			Family Na	ime o	r Surname			
Given Name (fir  Inventor's Signature  Residence: City  Post Office Address	rst and middle [if ar	ny])	State			Country Zip	Family Na	Date	cd Citizenship			
Given Name (fir  Inventor's Signature  Residence: City  Post Office Address  City  Name of Inventor	rst and middle [if an	iy])	State			Country  Zip  filed for	Family Na	Date	c Surname  Citizenship  Country			
Given Name (fir  Inventor's Signature  Residence: City  Post Office Address  City  Name of Inventor		iy])	State			Country  Zip  filed for	Family Na	Date	c Surname  Citizenship  Country			
Given Name (fir  Inventor's Signature  Residence: City  Post Office Address  City  Name of Inventor  Given Name (fir  Inventor's Signature		iy])	State			Country  Zip  filed for	Family Na this unsigned Family Na	Date	Citizenship  Country  aventor  Surname			
Given Name (fir  Inventor's Signature  Residence: City  Post Office Address  City  Name of Inventor  Given Name (fir  Inventor's Signature  Residence: City		iyl)	State	on has t		Country  Zip  filed for	this unsigners of the second s	Date  Date  ned in	Citizenship  Country  aventor  Surname			
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